

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	C-A		10-15-01
FEES DETERMINATION			
O.I.P.E. CLASSIFIER		49	10/29/01
FORMALITY REVIEW	MH	920	11-13-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
■	Allowed	I	Interference
—	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final	53
Original	54
2	55
3	56
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46	99
47	100

Claim	Date
Final	51
Original	52
53	54
55	56
57	58
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99	100

Claim	Date
Final	101
Original	102
103	104
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet(s) re

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